

Ship Mon Oct 6

Work Order ID 125034

\*125034\*

Page 1

Item ID: D4640-3

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Stop

\*NS2\*

Item Name: Fwd Wall Protector

Start Date: 10/3/2014 Start Qty: 2.00

\*2\*

Cust Item ID:

Required Date: 10/3/2014 Req'd Qty: 2.00

\*2\*

Customer:

Reference:

Approvals: Process Plan: MJS

Date: 11-10-03

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr

Revision Nbr

D4640

D

0.00

100

\*100\*

Waterjet

FLOW CNC Waterjet

Light Gray Lexn. 093

Memo

0.00

\*\*\*Confirm if parts are trimmed or untrimmed prior to cutting \*\*\*

Cut as per dwg

Prog Rev: 0

Dwg Rev: 0

Deburr as required

0.00

110

\*110\*

QC

Quality Control

QC2- Inspect parts off machine FAI/FAIB

Memo

0.00

2

0

DAS  
23  
9-89

14-10-8

2

0

DAS  
23  
9-89

14-10-8

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
--	--	---	--

# Work Order ID 125034

Friday, October 03, 2014 10:46:38 AM

**\*125034\***

Page 2

Item ID: D4640-3

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Fwd Wall Protector

Start Date: 10/3/2014 Start Qty: 2.00

**\*2\***

Cust Item ID:

Required Date: 10/3/2014 Req'd Qty: 2.00

**\*2\***

Customer:

Reference:

Run Start

**\*NR1\***

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop

**\*NR2\***

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

120

QC8- Inspect parts - second check

0.00

**\*120\***

QC

Memo

0.00

Quality Control

USE TEMPLATE TO MARK HOLE LOCATIONS WITH A FINE POINT  
MARKER ON TEXTURED SIDE

DAS  
38  
9-89

14-10-9

PTO →

130

Identify as per dwg & Stock Location: \_\_\_\_\_

0.00

**\*130\***

Packaging

Memo

0.00

Packaging

PPD  
125029

DAS  
06  
9-89

OCT 09 2014

140

QC21- Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.00

Quality Control

14/10/10

NF  
14-10-09

DQA:

Date:

14/12/08

QA Closed:

8/10/09

Date:

14/12/4

## WORK ORDER NON-CONFORMANCE / UPDATE

Work Order update only ☐

Work Order: <u>125034</u>	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>			
Part No. <u>D4640-3</u>		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input checked="" type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. <u>14-4354</u>		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design	14-10-9	100	1	found mark on 1 pc cut from materials already use that was on the floor  <u>RE: Operator didn't</u> <u>check on &amp; handle it with</u> <u>care</u>	DAS 16 9-89  Q>2042 14/10/09	scrap / destroy  no replace MLEXS.093F6006-01 H129471 (\$5.91)	14/10/09	DAS 38 9-89  14-10-9	DAS 16 9-89  Q>2042 14/10/09
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

## FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Centre Not Concentric	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crimp/Kink/Ripple/Wave	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Crushing	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> Marks/Chatter	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set	
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration	
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence	

# Picklist Print

Friday, October 03, 2014 10:46:44 AM

Page 1

Work Order ID: 125034

\*125034\*

Parent Item: D4640-3

\*D4640-3\*

Parent Item Name: Fwd Wall Protector

Start Date: 10/3/2014

Required Date: 10/3/2014

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.05.08 NEW ISSUE DD VERF:EC  
12.10.17 AS PER REV.B VERF:JLM

IPP REV:B

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

MLEXS.093-F6006-07

Purchased

No

100

sf

2,570.313

5.3

12

DAS

23

9-89

14-10-8

\*MI FXS 093-F6006-07\*

\*\*

GE PLASTICS LEXAN SHEET (Grey)

## Location

## Loc Qty

## Loc Code

MAT023

2570.31332

114459

229.26

123105

38

124501

543.5

m128668

181.35

m129014

102.33332

m129471

21.92

m129738

1453.95

129471

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
--	--	---	--



